
*** RX REPORT ***

RECEPTION OK

| | |
|-------------------|-------------|
| TX/RX NO | 8018 |
| RECIPIENT ADDRESS | |
| DESTINATION ID | |
| ST. TIME | 02/05 19:18 |
| TIME USE | 01'00 |
| PGS. | 5 |
| RESULT | OK |

(1)

12-11-08

2-5-09

KIRK W. LILLY
480-373-0062
9940 E. HAMMOND LN.
MESA AZ, 85207-7141

APPLICATION NUMBER 09/778,575PATENT NUMBER 6778813

I Kirk Lilly sent you 530 \$ on 8/15/08 & you sent it back saying it was a couple days late. Then I sent in proof on September 23 and you guys said you never recieved it. So here is my proof again. On page one is the proof that my sister sent a check & her name is J. Larrie Toliver. On page two here's proof that the post office verified we sent express mail on 8/15/08.

Kirk W. Lilly

Lorrie Lilly

From: "Lorrie Lilly" <lorrielilly@cox.net>
To: "Lorrie Lilly" <lorrielilly@cox.net>
Sent: Wednesday, October 01, 2008 6:22 PM

08/15/2008 Electronic Purchase USPS 0352229553 2747 E
UNIVERSITY DR
MESA AZUS (-16.50)

Desert Schools Credit Union

Lorrie A Toliver (XXXX63)

- a.. My Accounts
- b.. Transfers
- c.. Bill Payment
- d.. eStatements
- e.. Resource Center

View Message

Message Options Received Messages Sent Messages

RE:

Date: Monday, September 22, 2008 4:34 PM

From: Member Care

To: Lorrie A Toliver

Subject: RE:

Message: Good Afternoon Lorrie,

Thank you for your email regarding the card transaction. This transaction was processed with your debit card on 8/15/08. Our records show the card was present and swiped at the time of the transaction. The description of the merchant is "POSTAGE STAMPS". We can order a sales draft

of the transaction, however there will be a \$6.00 fee assessed to the account, as we are charged this fee for ordering the copy through Visa. If a

10/1/2008

2

Consumer Affairs and Claims



COPY

September 25, 2008

Mr. Kirk Lilly
9940 E. Hammond Lane
Mesa, AZ 85207-7141

Dear Mr. Lilly:

This letter is provided to document the difficulties you experienced with delivery of your Express Mail sent on 8/15/08. It is my understanding the Express Letter was delayed. As a result, you may receive late fees and interest charges from your correspondents. I regret you did not receive the service you deserve and expect.

Perhaps by providing a copy of this letter to your creditors, this information may be used in judging the appropriateness of any penalties you may be assessed. Past experience has shown many companies willingly review their customer's file and often waive any penalty or late fees when it is apparent delayed or missed payment is not the fault of their customer.

Please accept my apology for the inconvenience this has caused.

Sincerely,



A handwritten signature in cursive script that reads "Maria Almada".

Maria Almada
Consumer Affairs and Claims

Ref: CA39867586

P. O. Box 21828
PHOENIX AZ 85038-1828
PHONE (602)223-3223
FAX: (602)223-3202

3

| | | | | | |
|---|--|---------------|---------------|---|--|
| United States Treasury | | 15-51 000 | G 035,721,342 | Check No. | |
|  | 10 02 08 52 | AUSTIN, TEXAS | | 2221 85877147 | |
| | 2221 85877147 13100001 M2 | | | CC20090001 | |
| | Pay to the order of LORRIE A TOLLIVER | | | | |
| | 3821 E COVINA ST MESA AZ 85205 | | | | |
| | | | | \$****530*00 | |
| PER ENCLOSED MAILING NOTICE | | | | VOID AFTER ONE YEAR | |
| | | | |  | |

| | | | | |
|----------------------------------|---|---|---------------|------------|
| NOTICE TO CHECK RECIPIENT | | TREASURY-FINANCIAL MANAGEMENT SERVICE TFS FORM 3098(Rev.) | | |
| VENDOR NAME: | LORRIE A TOLLIVER | VENDOR T.D. NUMBER: | LORRIE A TOL | |
| AGENCY NAME AND BILLING ADDRESS: | DEPARTMENT OF COMMERCE - US PATENT AND TRADEMARK O 2051 JAMIESON AVENUE ALEXANDRIA VA22314 | U.S. TREASURY REG. FINANCIAL CENTER: | AUSTIN, TEXAS | |
| | | CHECK NUMBER | CHECK AMOUNT | CHECK DATE |
| | | 2221-85877147 | \$****530.00 | 10-02-08 |

MAILROOM DATE: 08/20/2008
 NAME/NUMBER: 6778813
 AMOUNT REFUNDED: 530.00
 EFUNDED FOR PATENT NO. 6778813 DUE TO EXPIRATION OF
 PATENT FAILURE TO PAY MAINTENANCE FEE BY 08/18/2008.
 YOUR \$530.00 IS HEREBY REFUNDED.
 FOR QUESTIONS RELATING TO REFUND, CONTACT
 MICHAEL BANGURA - (571) 272-6500

| |
|-------------------------|
| AGENCY SCHEDULE NUMBER |
| CC20090001 |
| AGENCY TELEPHONE NUMBER |
| 571-272-6500 |

PLEASE DIRECT ANY INQUIRIES CONCERNING THIS PAYMENT TO THE AGENCY AT THE ADDRESS (OR PHONE NUMBER) INDICATED ABOVE